

**PROTOCOLS, MEDICATIONS, AND DEVICES COMMITTEE
MINUTES
May 12, 2005**

MEMBERS PRESENT

John Gallagher, III
Marc Holyfield
Rob Jarvis
Terence Mason
Terry Shine

MEMBERS ABSENT

Janine Anderson
David Bank (non-voting)
Patricia Ellis
Charles Finch
Sue Kern

TELECONFERENCE

Steven Curry

I. CALL TO ORDER

John Gallagher called the meeting to order at 1:20 p.m.

II. DISCUSS/AMEND and ACTION ON THE MINUTES OF March 3, 2005

A motion was made by Rob Jarvis and seconded by Marc Holyfield to approve the minutes with the following corrections to be noted. Section III, line 2 should read: *September 25, 2004*, not 2005. Line 3 should read: *December 13, 2004*, not 2005. Page 3, Section B, Epinephrine, line four should read, "If using in a code, you may administer 2 mg via an ET Tube every three to five minutes."

III. OLD BUSINESS:

A. Discussion and Action on Adopting Drug Profiles as Guidance Documents for Vasopressin and Vaponefrin

At the past meeting, a concern was raised with the regard to the stability of Vasopressin. John Gallagher researched the stability of the drug and reported that Vasopressin does not require refrigeration.

A concern was raised with regard to the format of the drug profiles for Vasopressin and Vaponefrin.

A motion was made by Marc Holyfield, seconded by Terry Shine to table the Vasopressin and Vasopressin drug profile to the next meeting of PMD Committee in order to format the drug profile. **Motion carried.**

Item:	Vasopressin and Vaponefrin Drug Profile
Follow Up:	Next PMD Committee Meeting
When:	September 15, 2005
Who:	Kay Lewis

B. Discussion and Action on Revised Pediatric Treatment and Triage Protocols and on Additional Recommendations to the Revised Pediatric Treatment and Triage Protocols by Dr. Robert Berg and Dr. Marc Berg

One change was recommended on the Pediatric- Altered Mental Status Protocol.

In the second to the last box under ALS (right side), change line three to read: *D10 – 5 cc/kg (<2 years) IV/IO* and to change line four to read: *D10 – 2cc/kg (> 2 years) IV/IO*.

It was recommended to change the wording on the Pediatric- Pulseless Electric Activity (PEA)/Asystole Protocol. In the third box below BLS (left side), change the wording to read: *If no shock indicated and no pulse, continue CPR for 1 minute. Reassess with AED. If no shock indicated, continue CPR for 1 minute. Repeat cycle.*

The dosage for Epinephrine was discussed on the Pediatric-Anaphylaxis/Allergic Reaction. It was recommended to clarify the dosage and work on the wording for this protocol.

Item: Pediatric- Anaphylaxis/Allergic Reaction Protocol
Follow Up: Next PMD Meeting
When: September 15, 2005
Who: John Gallagher

It was mentioned that the recommendation from Dr. Berg on the Pediatric-Supraventricular Tachycardia made the protocol easier and more understandable to read.

It was recommended to use Dr. Berg's recommendation as a template and rework the protocol for the next PMD Committee meeting.

Item: Pediatric- Supraventricular Tachycardia
Follow Up: Next PMD Meeting
When: September 15, 2005
Who: John Gallagher

IV. NEW BUSINESS:

A. Discussion and Action on Amending the Drug Lists in Exhibit 1 to A.A.C. R9-25-503

Sarah Harpring reported that at the prior EMS Council and MDC meeting the committees discussed the drug lists and the intention to have the dosage and concentrations taken out all together. It was recommended to indicate a minimum supply.

PMD was asked to go through the drug lists and indicate the minimum supply for each drug that was highlighted on the lists. The following are the recommendations from PMD:

EMT-P and Qualified EMT-I Drug List

Asprin:	324 mg
Atropine Sulfate:	8 mg multi dose vile 4 pre-fill syringes
Epinephrine:	2mg 1:1000 30 mg multi dose vile

Lidocaine HCl IV: 3 100mg pre-fill syringes
2, 1g vials or pre-mixed infusion

Nitroglycerin Tablets: 1 bottle

Phenylephrine Nasal Spray: 1 bottle

EMT-I Drug List

Aspirin: 324 mg

EMT-B Drug List

Aspirin: 324 mg

B. Discussion and Action on developing a protocol for Cardiocerebral Resuscitation (CCR)

It was recommended to delete *monophasic* from the document entitled *Fundamental Differences*

One change was recommended on the Out-of-Hospital Cardiac Arrest Algorithm. The last box in the center, omit 2000 and have it read: *Follow AHA Guidelines*.

A motion was made by Terence Mason, seconded by Terry Shine to accept the document with the recommended changes and submit to MDC and EMS Council.
Motion carried.

V. CALL TO THE PUBLIC

No one came forward

VI. SUMMARY OF CURRENT EVENTS

None

VII. NEXT MEETING

The next meeting will be held on September 15, 2005 at 1:00 p.m.

VIII. ADJOURNMENT

John Gallagher adjourned the meeting at 3:30 p.m.

Minutes prepared by Amanda Valenzuela

Approved by Committee on September 15, 2005